

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6008130	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 07/12/2016
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

GENERATIONS AT ROCK ISLAND

**2545 24TH STREET
ROCK ISLAND, IL 61201**

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
S 000	Initial Comments Annual statement of licensure violations	S 000		
S9999	Final Observations Section 300.670 d) Section 300.670 f) Section 300.670 Disaster Preparedness d) Fire drills shall include simulation of evacuation of residents to safe areas during at least one drill each year on each shift. f) Where the welfare of the residents precludes an actual evacuation of an entire building, there must be drills involving the evacuation of successive portions of the building under such conditions as to assure the capability of evacuating the entire building with the personnel usually available, should the need arise. These Requirements were not met as evidenced by: Based on on record review and interview the facility failed to simulate an evacuation of the nursing facility to prepare in the event of an emergency. This failure has the potential to affect all 109 residents in the nursing facility. Findings include: Facility inservice employee attendance rosters dated 8/28/15, 12/23/15 and 1/14/16 do not indicate that facility evacuation was completed. On 7/7/16 at 10:30 AM, E21/LPN (Licensed Practical Nurse) stated, "We have done fire drills, but we have never done evacuation down the stairs."	S9999		

Attachment A
Statement of Licensure Violations

Illinois Department of Public Health

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

07/29/16

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S9999	<p>Continued From page 1</p> <p>On 7/7/16 at 10:50 AM, E15/CNA (Certified Nursing Assistant) stated "We would grab people and get to the elevators and get them out as fast as possible. For the bariatric residents we couldn't use the stairs so we would have to use the elevator. If we can't use the elevator, I'm not sure how we would get them out. We have never done an evacuation drill."</p> <p>On 7/7/16 at 11:00 AM, E14/LPN stated, "I guess the firemen would have to carry them down the steps. We have never done an evacuation drill."</p> <p>On 7/7/16 at 10:10 AM, E1/Administrator confirmed a simulated evacuation of the nursing facility has never been done.</p> <p>(B) Section 300.7050 c) Section 300.7050 d) c) All staff who ever work on the unit (e.g., nurses, CNAs, housekeepers, social services and activities staff, and food service staff) shall receive at least four hours of dementia-specific orientation within the first 7 days of working on the unit. This orientation shall include: 1) Basic information about the nature, progression, and management of Alzheimer's disease and other dementia; 2) Techniques for creating an environment that minimizes challenging behavior from residents with Alzheimer's disease and other dementia; 3) Methods of identifying and minimizing safety risks to residents with Alzheimer's disease and other dementia; and 4) Techniques for successful communication with individuals with Alzheimer's disease and other dementia. d) Nurses, CNAs, and social service and activities staff who work on the unit at least 50 percent of</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>the time that they work at the facility shall participate in a minimum of 12 additional hours of orientation within the first 45 days after employment, specifically related to the care of persons with Alzheimer's disease and other dementia. This orientation shall be defined in facility policies and procedures; shall be in a form of classroom, return demonstration, and mentoring; and shall define to new staff the elements contained in Section 300.7050(e)(1)-(10).</p> <p>These Requirements were not met as evidenced by:</p> <p>Based on observation, interview and record review the facility failed to provide four hours of dementia specific orientation, and an additional 12 hours of orientation within 45 days of hire for two Certified Nursing Assistant (E11,12/Certified Nursing Assistant) and one housekeeper(E17/Housekeeper). This failure has the potential to affect all 15 residents (R8-R11& R33-R43) residing on the Alzheimer's Unit.</p> <p>Findings include:</p> <p>On 7/5/16, 7/6/16 and 7/7/16 between 8:30 AM and 2:00 PM, E17/Housekeeper was on the Alzheimer's unit cleaning residents' rooms and living areas.</p> <p>On 7/7/16 at 9:00 AM, E13/Social Service Director/Unit Director provided the following documentation; Date of hires: E11/CNA-2/12/16, E12/CNA-3/22/16, E17/Housekeeper-5/23/16. The Dementia Training Log for 2015 and 2016 did not include any documentation indicating E11&E12(Certified Nurses Assistants/CNA) or E17(Housekeeper), received four hours of dementia specific orientation within first seven working days, or 12 hours of additional dementia specific orientation within first 45 days.</p> <p>On 7/7/16 at 11:00 AM, E13(Social Service Director/Unit Director) verified E11&E12/CNA's</p>	S9999		

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S9999	Continued From page 3 did not receive four hours of dementia specific orientation within the first seven days of working on the unit, or 12 additional hours of dementia specific orientation within first 45 days. On 7/8/16 at 9:00 AM, E13/Social Service Director/Unit Director, verified E17/Housekeeper, did not receive four hours of dementia specific orientation within the first seven days of working on the unit, or 12 additional hours of dementia specific orientation within the first 45 days. The facility's working schedule provided by E1/Administrator on 7/5/16, documents E11/CNA worked 7/4/16, E12/CNA worked 7/4/16, 7/6/16 and 7/7/16 and E17/Housekeeper worked 7/5/16 and 7/6/16. The facility's Census Report dated 7/6/16 documents 15 residents (R8 to R11 and R33 to R43) reside on the Alzheimer's Unit. (AW)	S9999		